

SERVICES OTHER THAN PERSONAL

Bu. Vou. No. _____

U. S. _____
 (Department, bureau, or establishment)

Voucher prepared at _____
 (Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To Ramo-Wooldridge Corporation
 (Payee)

Los Angeles 45, California
 (Address) (City) (State)

Page 1 of 3
 PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)		QUANTITY	UNIT PRICE		AMOUNT	
		Discount Terms	INVOICE NO.		Cost	Per	Dollars	Cts.
			2141					
			2142					
			2143					
			2144					
			2145					
			2146					
			2147					
			2148					
			2149					
			2150					
Use continuation sheet(s) if necessary								
Shipped from _____ to _____		Weight _____	Government B/L No. _____		Total _____		cont. _____	

PAYMENT:
 Complete
 Partial
 Final

25X1A

**UBLIC VOUCHER FOR PURCHASES A
 SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____

Bu. Vou. No. _____

U. S. _____
 (Department, bureau, or establishment)

Voucher prepared at _____
 (Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To Ramo-Wooldridge Corporation
 (Payee)

Los Angeles 45, California
 (Address) (City) (State)

Page 2 of 3
 PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)		QUANTITY	UNIT PRICE		AMOUNT	
		Discount Terms	INVOICE NO.		Cost	Per	Dollars	Cts.
			2151					
			2152					
			2153					
			2154					
			2155					
			2156					
			2157					
			2158					
			2159					
			2160					
Use continuation sheet(s) if necessary								
Shipped from _____ to _____		Weight _____	Government B/L No. _____		Total _____		cont. _____	

PAYMENT:
 Complete
 Partial
 Final

(Payee must NOT use this space)

Approved For Release 2002/06/10 : CIA-RDP64-00260R000600020058-1
PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
 Bu. Vou. No. _____

U. S. _____
 (Department, bureau, or establishment)

Voucher prepared at _____
 (Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To Ramo-Wouldridge Corporation
 (Payee)

Los Angeles 45, California
 (Address) (City) (State)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)		QUANTITY	UNIT PRICE		AMOUNT	
		Discount Terms	INVOICE NO.		Cost	Per	Dollars	Cts.
			2161					
			2162					
			2163					
			2164					
			2170					
			2171					
			2172					
			2173					
			2174					
			2175					

PAYMENT:
 Complete
 Partial
 Final

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total _____

I certify that the above bill is correct and just and that payment has not been received.
 (Sign original only)

(Payee must NOT use this space)
 Differences _____
 Amount verified; correct for _____
 (Signature or initials) *EL*

Date _____ *Payee _____
 (This certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____ Contract No. **A-101** Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

† Approved for \$ _____

By _____
 Title _____
 Date _____

SIGN ORIGINAL ONLY

PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

25X1A

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in favor of payee named above.
 { Cash, \$ _____, on _____, 19____ } Payee _____
 (Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name must be given in full. Example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
 † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.
 Approved For Release 2002/06/10 : CIA-RDP64-00360R000600020058-1
 Title _____